

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS  | ID NO.         | DATE               |
|---------------------|-----------|----------------|--------------------|
| FEE DETERMINATION   | BA        | 70385          |                    |
| O.I.P.E. CLASSIFIER |           | 16             | 3499               |
| FORMALITY REVIEW    | DS<br>PMB | 71694<br>70976 | 3-10-99<br>3-22-99 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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